



INTENT LANGUAGE AND NONLAPSING BALANCES FOLLOW-UP (HEALTH)

SOCIAL SERVICES APPROPRIATIONS SUBCOMMITTEE
STAFF: RUSSELL FRANDSEN

ISSUE BRIEF

SUMMARY

The objective of this issue brief is to determine if the Department of Health complied with the 67 purposes approved via intent language statements adopted by the Legislature during the 2017 General Session, 21 intent language statements from the 2016 General Session, and one intent language statement from the 2015 General Session that had impacts through June 30, 2017. This issue brief provides a follow up to each of the pieces of intent language passed. The Analyst has no concerns of non-compliance. Additionally, the purpose of this issue brief is to inform the Social Services Appropriations Subcommittee of \$20,758,120 in nonlapsing balances at the end of FY 2017 for the Department of Health. This review is to comply with the following from UCA 36-12-13(2)(g): “to report instances in which the administration may be failing to carry out the expressed intent of the Legislature.” This brief is for informational purposes only and requires no Legislative action.

DISCUSSION AND ANALYSIS

Intent Language Overview

The Analyst has no concerns of non-compliance with any intent language issued last year. This review helps fulfill the duty assigned to the Legislative Fiscal Analyst in [UCA 36-12-13](#) that states “report instances in which the administration may be failing to carry out the expressed intent of the Legislature.” The following is a list of 83 different legislative intent statements grouped into 67 purposes from the 2017 General Session with the Department of Health’s response or comments by the Analyst. Intent language may be adopted by the Legislature to explain or place conditions on the use of funds. Intent language is binding for one year and may not contradict or change statutory language. Follow up to intent language related to ARRA (federal stimulus) funding can be found in the Issue Brief entitled “*ARRA Funds Approval*.” The Subcommittee may want to direct the agency to take further action on the information presented in the reports requested by the Legislature.

Overview of Intent Language From the 2017 General Session

There are 67 purposes approved via intent language statements reviewed below. These 67 purposes can be grouped into the following three categories:

1. Providing nonlapsing authority of \$18.6 million in FY 2017 from FY 2016 funds (28 purposes). Four intent language statements provided unlimited nonlapsing authority. The table on the next page details the \$18.6 million retained under nonlapsing authority provided. The Department of Health has \$15.4 million in nonlapsing funds from the intent language statements with specific maximums.
2. Providing specific direction (12 purposes)
3. Requiring a report (27 purposes)
 - a. Eighteen of these reports are for performance measures

Agency-initiated requests for nonlapsing authority for General Fund resulted in 2.8% of General Fund appropriated in FY 2017 being retained as nonlapsing funds for those divisions with initiatives for nonlapsing authority. The second table on the next page has a summary of this information. Some of the nonlapsing requests listed on the page below were to retain funds other than General Fund or were not initiated by the Department of Health.

Nonlapsing Authority Via Intent Language		
Purpose	FY 2017	Authorized Total
Medicaid Management Information System Replacement	\$8,124,200	\$8,124,200
Children With Complex Medical Conditions (2015 General Session)	\$2,959,700	\$2,959,700
Medicaid Sanctions	\$1,979,000	all
Traumatic Brain Injury Funding	\$527,700	\$775,000
Laboratory Equipment and Medical Examiner	\$525,000	\$525,000
Information Technology Security	\$500,000	\$500,000
Drug Prevention Programs	\$500,000	\$500,000
Federally Mandated Projects (Medicaid)	\$475,000	\$475,000
Childcare and Health Care - Fines	\$455,300	all
Emergency Medical Services - Fines	\$428,600	all
Executive Director - Three Projects	\$300,000	\$300,000
Higher Savings From Psychotropic Drugs	\$289,800	all
Emergency Medical Services - Fees	\$250,000	\$250,000
Newborn Screening	\$250,000	\$250,000
Facility Plan Review Activities	\$210,000	\$210,000
Health Facility Licensure	\$203,400	\$245,000
Vital Records Application Portal	\$200,000	\$200,000
Laboratory Equipment (Epidemiology)	\$175,000	\$175,000
Bleeding Disorders Program	\$50,000	\$50,000
Database Upgrades and Computer Equipment	\$50,000	\$50,000
Infertility Study	\$45,000	\$45,000
Local Health Emergency	\$25,000	\$25,000
Parkinson Disease Registry	\$20,000	\$20,000
Public Education Regarding Radon	\$15,000	\$15,000
Drug Overdose Prevention	\$15,000	\$15,000
Total	\$ 18,572,700	\$ 15,708,900

Summary of Agency-initiated Requests			
Line Item	FY 2017 Appropriated General Fund	Nonlapsed General Fund	%
Medicaid and Health Financing	\$ 4,943,700	\$ 975,000	20%
Executive Director's Operations	\$ 6,480,100	\$ 350,000	5%
Disease Control and Prevention	\$ 15,311,200	\$ 725,000	5%
Medicaid Mandatory Services	\$ 325,735,000	\$ 8,124,200	2%
Family Health and Preparedness	\$ 21,744,300	\$ 253,400	1%
Total	\$ 374,214,300	\$ 10,427,600	2.8%

Nonlapsing Authority Via Intent Language From the 2017 General Session**1. Nonlapsing Authority for Three Projects in the Executive Director's Office (S.B. 7, Item 1):**

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$300,000 of Item 24 of Chapter 5, Laws of Utah 2016 for the Department of Health's Executive Director's Operations line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to: (1) replace and update information technology servers, equipment, and software or personal computers, printers, and software, (2) fund a temporary information technology manager to support the server consolidation project, and (3) fund major software programming projects such as SharePoint upgrades or new SharePoint processes. (The agency nonlapsed \$300,000).

Agency Response: "These funds will be used for the projects described."

2. Nonlapsing Authority for Vital Records Application Portal (S.B. 7, Item 1):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$200,000 of Item 24 of Chapter 5, Laws of Utah 2016 for the Department of Health's Executive Director's Operations line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to ongoing development and maintenance of the vital records application portal. (The agency nonlapsed \$200,000).

Agency Response: "Funds will be used to continue the rewrite of the Vital Records Application Portal (VRAP). The first two applications, EDEN (the Electronic Death Registration application) and UMED (the Medical Examiner's application), will go live in FY2018. Additionally, programming will begin in FY2018 for the rewrite of the electronic birth registration application (UINTAH). EDEN, UMED, and UINTAH are all part of the overall VRAP system."

3. Nonlapsing Authority for Database Upgrades and Computer Equipment (S.B. 7, Item 1):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$50,000 of Item 24 of Chapter 5, Laws of Utah 2016 for the Department of Health's Executive Director's Operations line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to ongoing maintenance and upgrades of the database in the Office of Medical Examiner and the Electronic Death Entry Network or replacement of personal computers and information technology equipment. (The agency nonlapsed \$50,000).

Agency Response: "This funding will be used to replace aging computers and printers within the Center for Health Data and Informatics. In addition, it will be used, in conjunction with the funding above, for ongoing maintenance and development of EDEN (the Electronic Death Registration application) and UMED (the Medical Examiner's application), which will go live in FY2018."

4. Nonlapsing Authority for Telehealth Pilot Program (H.B. 345, lines 125 to 128):

Under Section 63J-1-603 the Legislature intends that appropriations provided in this section not lapse at the end of fiscal year 2018. The use of any nonlapsing funds is limited to the administration of Title 26, Chapter 59, Telehealth Pilot Program and funding the Telehealth Pilot Project Grant Program described in Section 26-59-103.

Agency Response: "Funds will be used for the administration of the telehealth pilot program and two year telehealth grants."

5. Nonlapsing Authority for Health Facility Licensure and Certification Activities (S.B. 7, Item 2):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$245,000 of Item 25 of Chapter 5, Laws of Utah 2016 in the Department of Health's Family Health and

Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to health facility licensure and certification activities. (The agency nonlapsed \$203,400).

Agency Response: “Funds will be used for health facility licensure and certification timelines to help the bureau meet licensure and certification requirements.”

6. Nonlapsing Authority for Testing Supplies and Processes (S.B. 7, Item 2):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$250,000 of Item 25 of Chapter 5, Laws of Utah 2016 in the Department of Health's Family Health and Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to testing, certifications, background screenings, replacement testing equipment and testing supplies. (The agency nonlapsed \$250,000).

Agency Response: “Nonlapsing authority allows for an improved continuous funding from an irregular funding source. The funds will be used for EMS certification (now licensure), background screenings for all EMS personnel, and on-going training as we move from a four-year to a two-year certification/licensure cycle for all EMS personnel.”

7. Nonlapsing Authority for Criminal Fine and Forfeiture Money (S.B. 7, Item 2):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that criminal fines and forfeitures collected in the Emergency Medical Services program of Item 25 of Chapter 5, Laws of Utah 2016 in the Department of Health's Family Health and Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to purposes outlined in Section 26-8a-207(2). (The agency nonlapsed \$428,600).

Agency Response: “Nonlapsing authority allows for funding in accordance with Section 26-8a-207(2). The Bureau will use these balances as prescribed in the Section. The funds will be used for staff support, administration of the grants funds, other administrative costs defined in the chapter, trauma system development, and allocations in per-capita and competitive grants for the provision of emergency medical services.”

8. Nonlapsing Authority for Civil Penalty Money from Childcare and Health Care Provider Violations (S.B. 7, Item 2):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that civil money penalties collected in the Child Care Licensing and Health Care Licensing programs of Item 25 of Chapter 5, Laws of Utah 2016 in the Department of Health's Family Health and Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to trainings for providers and staff, as well as upgrades to the Child Care Licensing database. (The agency nonlapsed \$25,300 for Child Care, \$430,000 for Health Care Licensing).

Agency Response: “Healthcare Civil Money Penalty funds from nursing facilities are restricted by Federal law to use with projects that directly affect patients of nursing facilities. Other licensure civil money penalty funds will be used for training of staff and facilities and other projects that directly benefit health facility providers. There are currently no projects approved.”

9. Nonlapsing Authority for Bureau of Health Facility Licensure, Certification and Resident Assessment for Plan Reviews (S.B. 7, Item 2):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$210,000 of Item 25 of Chapter 5, Laws of Utah 2016 in the Department of Health's Family Health and Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any

nonlapsing funds is limited to health facility plan review activities. (The agency nonlapsed \$210,000).

Agency Response: "The funds will be used for evaluating health care facility new construction and remodel projects in order to ensure compliance with appropriate health and fire codes and in accordance with state health facility construction rules."

10. Nonlapsing Authority for People with Bleeding Disorders (S.B. 7, Item 2):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$50,000 of Item 25 of Chapter 5, Laws of Utah 2016 in the Department of Health's Family Health and Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to the services to eligible clients in the Assistance for People with Bleeding Disorders Program. (The agency nonlapsed \$50,000).

Agency Response: "Funds will be incorporated in the distribution of funds for eligible bleeding disorder clients."

11. Nonlapsing Authority for Medicaid Sanctions (S.B. 7, Items 2 and 5):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that funds collected as a result of sanctions imposed under Section 1919 or Title XIX of the Federal Social Security Act and authorized in Section 26-18-3 of the Utah Code of Item 25 of Chapter 5, Laws of Utah 2016 in the Department of Health's Family Health and Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to purposes outlined in Section 1919. (The agency nonlapsed \$419,100).

Under Section 63J-1-603 of the Utah Code, the Legislature intends that funds collected as a result of sanctions imposed under Section 1919 or Title XIX of the Federal Social Security Act and authorized in Section 26-18-3 of the Utah Code of Item 32 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid Sanctions line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to purposes outlined in Section 1919. (The agency nonlapsed \$1,979,000).

Agency Response: "Medicaid Sanctions can only be used for specific purposes outlined under Section 1919 or Title XIX of the Federal Social Security Act and authorized under section 26-18-3 of the Utah Code. Funds must be used for projects approved by Centers for Medicare and Medicaid Services (CMS). There are currently no projects approved."

12. Nonlapsing Authority for Drug Overdose Prevention Initiatives (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$15,000 of Item 122 of Chapter 396, Laws of Utah 2016 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to drug overdose prevention initiatives. (The agency nonlapsed \$15,000).

Agency Response: "Funds will be used to expand educational initiatives to promote the availability, access to, and use of naloxone to reduce opioid overdose deaths."

13. Nonlapsing Authority for Parkinson Disease Registry (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$20,000 of Item 122 of Chapter 396, Laws of Utah 2016 for the Department of Health's Disease Control and

Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to funding a Parkinson Disease registry. (The agency nonlapsed \$20,000).

Agency Response: "Funds will be used to continue to expand the coverage and use of the Parkinson's Disease Registry."

14. Nonlapsing Authority for Public Education Regarding the Effects of Radon (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$15,000 of Item 57 of Chapter 395, Laws of Utah 2016 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to public education regarding the effects of radon. (The agency nonlapsed \$15,000).

Agency Response: "Funds will be used to expand and enhance the public education media campaign regarding the dangers of radon."

15. Nonlapsing Authority for Equipment and Services for the Bureau of Epidemiology (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$175,000 of Item 26 of Chapter 5, Laws of Utah 2016 in the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to maintenance or replacement of computer equipment, software, or other purchases or services that improve or expand services provided by the Bureau of Epidemiology. (The agency nonlapsed \$175,000).

Agency Response: "Funds will be used to replace aging computer equipment, and purchase or upgrade software to expand disease monitoring and tracking capabilities of the Bureau's Programs."

16. Nonlapsing Authority for Local Health Emergency (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$25,000 of Item 26 of Chapter 5, Laws of Utah 2016 in the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to local health department expenses in responding to a local health emergency. (The agency nonlapsed \$25,000).

Agency Response: "Funds will be used to support Local Health Department efforts to provide services in the event of a public health emergency. Funds will be distributed by the Utah Association of Local Health Departments."

17. Nonlapsing Authority for Equipment for Newborn Screening (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$250,000 of Item 26 of Chapter 5, Laws of Utah 2016 fees collected for the Newborn Screening Program in the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to maintenance, upgrading, replacement, or purchase of laboratory or computer equipment and software. (The agency nonlapsed \$250,000).

Agency Response: "The Newborn Screening program intends to purchase a robotic system for liquid handling for DNA extraction and PCR preparation."

18. Nonlapsing Authority for Building Improvements and One-time Personnel (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$525,000 of Item 26 of Chapter 5, Laws of Utah 2016 in the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to laboratory equipment, computer equipment, software, and building improvements, and temporary and one-time personnel needs within the Public Health Laboratory and the Office of the Medical Examiner. (The agency nonlapsed \$525,000).

Agency Response: "The Utah Public Health Laboratory intends to use funds for the purchase of equipment for the environmental chemistry and toxicology sections, the purchase of service agreements for existing equipment, the purchase of temperature monitoring system for laboratory equipment, and general upgrades to the conference room AV systems. The Office of the Medical Examiner will use these funds to replace or upgrade autopsy, sample retrieval and other equipment. Funds will also be used support temporary staff resources to accommodate the increasing caseload."

19. Nonlapsing Authority for Drug Prevention Programs (S.B. 7, Item 3):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$500,000 of Item 26 of Chapter 5, Laws of Utah 2016 in the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to alcohol, tobacco, and other drug prevention, reduction, cessation, and control programs or for emergent disease control and prevention needs. (The agency nonlapsed \$500,000).

Agency Response: "Funds will be used to continue and expand the Smoking Prevention and Cessation Campaigns through use of various forms of the media. Quitline smoking cessation services will be able to serve more people."

20. Nonlapsing Authority for Infertility Study (S.B. 3, Item 13):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$45,000 of the money provided in this item for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to conducting an infertility study and related activities. (The agency nonlapsed \$45,000).

Agency Response: "Funds will be used to support a contractor who will gather and analyze data and compile the Infertility Study."

21. Nonlapsing Authority to Improve Information Technology Security (S.B. 7, Items 4, 6, and 7):

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$500,000 of Item 31 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid and Health Financing line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited to improving existing application level security and providing redundancy for core Medicaid applications. (The agency nonlapsed \$500,000).

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$500,000 of Item 34 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid Mandatory Services line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited to improving existing application level security and providing redundancy for core Medicaid applications. (The agency nonlapsed \$0).

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$500,000 of Item 35 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid Optional Services line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited to

improving existing application level security and providing redundancy for core Medicaid applications. (The agency nonlapsed \$0).

The Legislature intends that the \$500,000 in Beginning Nonlapsing provided to the Department of Health's Medicaid and Health Financing line item for State Match to improve existing application level security and provide redundancy for core Medicaid applications is dependent upon up to \$500,000 funds not otherwise designated as nonlapsing to the Department of Health's Medicaid Mandatory Services line item, Optional Services line item, Medicaid and Health Financing line item or a combination from all three line items not to exceed \$500,000 being retained as nonlapsing in Fiscal Year 2017.

Agency Response: "The nonlapsing funds will be used to encrypt data on servers, provide redundancy in critical applications, encrypt data in transit between production databases and application servers, add dual factor authentication, and create VPN solutions for several systems."

22. Nonlapsing Authority for Medicaid Management Information System Replacement (S.B. 7, Item 6, H.B. 3, Items 88 and 89, and S.B. 2, Item 84):

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$7,324,200 of Item 34 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid Mandatory Services line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited to the redesign and replacement of the Medicaid Management Information System. (The agency nonlapsed \$7,324,200).

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to an additional \$800,000 (for a total not to exceed \$8,124,200) of Item 34 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid Mandatory Services line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited to the redesign and replacement of the Medicaid Management Information System. (The agency nonlapsed \$800,000).

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to an additional \$800,000 (for a total not to exceed \$8,124,200) of Item 35 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid Optional Services line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited to the redesign and replacement of the Medicaid Management Information System. (The agency nonlapsed \$0).

The Legislature intends that the \$800,000 in beginning nonlapsing provided to the Department of Health's Medicaid Services line item for the redesign and replacement of the Medicaid Management Information System is dependent upon up to \$800,000 funds not otherwise designated as nonlapsing to the Department of Health's Medicaid Mandatory Services line item, Medicaid Optional Services line item, or a combination of both line items not to exceed a total of \$8,124,200 being retained as nonlapsing in Fiscal Year 2017 for this purpose.

Agency Response: "The nonlapsing balance of \$8,124,200 will be used for the ongoing redesign and replacement of the Medicaid Management Information System."

23. Nonlapsing Authority for Computer Equipment and Federally-mandated Projects (S.B. 7, Item 4):

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$475,000 of Item 31 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid and Health Financing line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited

to compliance with federally mandated projects and the purchase of computer equipment and software. (The agency nonlapsed \$475,000).

Agency Response: “These funds will be expended to replace computer equipment and software and to support the implementation costs of several federally mandated projects in FY 2018 including completion of HIT – Health Information Technology to convert provider medical records to an electronic health record, TMSIS – Transformed Medicaid Statistical Information System federal reporting project, 1095 – project to upgrade systems for the Affordable Care Act Information Returns (AIR) program, and SSNRI – Social Security Number Removal Initiative.”

24. Nonlapsing Authority to Serve Children With Complex Medical Conditions (S.B. 7, Item 7)

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$2,959,700 of Item 35 of Chapter 5, Laws of Utah 2016 in the Department of Health's Medicaid Optional Services line item shall not lapse at the close of Fiscal Year 2017. The use of nonlapsing funds is limited to a pilot program for assistance for children with disabilities and complex medical conditions for the duration of the pilot. (The agency nonlapsed \$2,959,700).

Agency Response: “These nonlapsing funds will be used to fund the pilot program for assistance for children with disabilities and complex medical conditions in FY 2018.”

25. Nonlapsing Authority for Higher Savings From Psychotropic Drugs (S.B. 7, Item 7):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that any actual savings greater than \$164,800 that are due to inclusion of psychotropic drugs on the preferred drug list and accrue to the Department of Health's Medicaid Optional Services line item from the appropriation provided in Item 35, Chapter 5, Laws of Utah 2016 shall not lapse at the close of Fiscal Year 2017. The Division of Finance shall transfer these funds to the Medicaid Expansion Fund created in Section 26-36b-208 of the Utah Code. (The agency nonlapsed \$289,800).

Agency Response: Health - “These nonlapsing funds will be used to cover costs of the Medicaid Adult expansion programs as authorized in statute.” **Finance -** “The money was lapsed to the Medicaid Expansion Fund.”

26. Nonlapsing Authority for Dental Services to Newly-eligible Clients (H.B. 3, Item 89):

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$500,000 provided for the Department of Health's Medicaid Optional Services line item in Item 132 of Chapter 396, Laws of Utah 2016 shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to the provision of dental services to newly-eligible clients. (The agency nonlapsed \$0).

Agency Response: “Funding initially appropriated for dental services to newly-eligible clients was eliminated in the 2017 General Session. Therefore, no funds were nonlapsed from fiscal year 2017.”

27. Transfer Nonlapsing Authority to New Medicaid Services Line Item (S.B. 3, Item 173):

The Legislature intends that all the nonlapsing authority approved for retaining funds in FY 2018 that were appropriated in FY 2017 for the Department of Health's Medicaid Optional Services, Medicaid Mandatory Services, and Medicaid Expansion 2017 line items be authorized for use in the new line item in the Department of Health in FY 2018 entitled Medicaid Services. (The agency nonlapsed \$11,373,700).

Agency Response: “The nonlapsing funds will be used for their intended purposes described throughout this document. This intent simply moves the nonlapsing funds from the Medicaid Mandatory Services (LHAA) and Medicaid Optional Services (LJAA) line items to the new Medicaid Services (LIAA) line item.”

28. Nonlapsing Authority for Traumatic Brain Injury Fund (H.B. 3, Items 83, 84, 85, and 86, and S.B. 2, Item 164):

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$100,000 funds not otherwise designated as nonlapsing to the Department of Health - Executive Director's Operations line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is for the Traumatic Brain Injury Fund. (The agency nonlapsed \$5,300).

The Legislature intends that the \$100,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$100,000 funds not otherwise designated as nonlapsing to the Department of Health - Executive Director's Operations line item being retained as nonlapsing in Fiscal Year 2017.

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$50,000 funds not otherwise designated as nonlapsing to the Department of Health - Family Health and Preparedness line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is for the Traumatic Brain Injury Fund. (The agency nonlapsed \$9,200).

The Legislature intends that the \$50,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$50,000 funds not otherwise designated as nonlapsing to the Department of Health - Family Health and Preparedness line item being retained as nonlapsing in Fiscal Year 2017.

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$75,000 funds not otherwise designated as nonlapsing to the Department of Health - Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is for the Traumatic Brain Injury Fund. (The agency nonlapsed \$75,000).

The Legislature intends that the \$75,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$75,000 funds not otherwise designated as nonlapsing to the Department of Health - Disease Control and Prevention line item being retained as nonlapsing in Fiscal Year 2017.

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$550,000 funds not otherwise designated as nonlapsing to the Department of Health - Medicaid and Health Financing line item shall not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is for the Traumatic Brain Injury Fund. (The agency nonlapsed \$438,300).

The Legislature intends that the \$550,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$550,000 funds not otherwise designated as nonlapsing to the Department of Health - Medicaid and Health Financing line item being retained as nonlapsing in Fiscal Year 2017.

Agency Response: "All funds retained will be used in accordance with the purpose of the Traumatic Brain Injury Fund to provide professional intake assessments, and physical, speech, or occupational therapy services to people with traumatic brain injuries. The goal is to facilitate them returning to school or work or improving their personal functionality."

Specific Direction Provided via Intent Language from the 2017 General Session

29. Administration Funding for Telehealth Pilot Program (H.B. 345, lines 122 to 124):

The Legislature intends that \$300,000 of this appropriation be used for telehealth grants to be awarded through a request for proposals. The remaining \$50,000 shall be used for program administration as described in Section 26-59-103.

Agency Response: "Funds will be used over a two year period for program administration of awarded two year telehealth grants."

30. Authorization to Raise Fees Connected to (S.B. 8, Lines 4107 to 4112):

Background Screening Fee - Public Safety - This fee should be the same as that charged by the Department of Public Safety. If the Legislature changes the fee charged by Department of Public Safety, then the Legislature also approves the same change for the Department of Health. Fees collected by Family Health and Preparedness are passed through to Public Safety.

Agency Response: "Family Health and Preparedness will charge a fee for background checks processed by public safety and consistent with the approved public safety fee schedule. Background screening fee will not be charged in excess of the public safety fee amount and no additional revenues for this fee will be retained by Family Health and Preparedness. Fees in addition to this fee will be charged to cover the administrative cost to the Division. These fees will be requested and approved in the Department fee schedule."

31. Authorization to Waive Fees During Disease Outbreaks (S.B. 8, Lines 4670 to 4671):

Under certain conditions of public health import (e.g., disease outbreak, terrorist event, or environmental catastrophe) fees may be reduced or waived.

Agency Response: "In the event of a public health emergency, Disease Control and Prevention will identify fees that will be reduced or waived and implement those actions when it is in the best interest of the public and to reduce or eliminate possible hardships."

32. Funding for a Psychological Autopsy Examiner (H.B. 346, lines 166 to 167):

The Legislature intends that the amount provided by this Item 1 be used to fund the appointment of a psychological autopsy examiner, as described in Section 26-4-28.5.

Agency Response: "The Office of the Medical Examiner will create, recruit for, and fill the position of a psychological autopsy examiner who will conduct case reviews and report findings."

33. Attorney for the Department of Health (S.B. 7, Item 38):

The Legislature intends that the Inspector General of Medicaid Services pay the Attorney General's Office the full state cost of the one attorney FTE that it is using at the Department of Health.

Agency Response: "Recovery of costs for this attorney should come from the Office of Inspector General of Medicaid Services."

34. Flexible Spending Authority for Hospital Provider Assessment Fund (S.B. 7, Item 6):

The Legislature authorizes the Department of Health to spend all available money in the Hospital Provider Assessment Expendable Special Revenue Fund for FY 2017 regardless of the amount appropriated as allowed by the fund's authorizing statute.

Agency Response (Finance): "The appropriated/authorized amount exceeded collections and disbursements. Available money was spent."

35. Flexible Spending Authority for Ambulance Service Provider Assessment Fund (S.B. 7, Item 6):

The Legislature authorizes the Department of Health to spend all available money in the Ambulance Service Provider Assessment Expendable Revenue Fund for FY 2017 regardless of the amount appropriated as allowed by the fund's authorizing statute.

Agency Response (Finance): "The appropriated/authorized amount exceeded collections and disbursements. Available money was spent."

36. Flexible Spending Authority for Medicaid Expansion Fund (S.B. 7, Item 8):

The Legislature authorizes the Department of Health to spend all available money in the Medicaid Expansion Fund for FY 2017 regardless of the amount appropriated as allowed by the fund's authorizing statute.

Agency Response (Finance): "The appropriated/authorized amount exceeded collections and disbursements. Available money was spent."

37. Transfer Balance in Nursing Care Facilities Account (H.B. 113, lines 534 to 537):

The Department of Finance shall transfer the remaining fund balance in the "Nursing Care Facilities Account" at fiscal year-end 2017 into the "Nursing Care Facilities Provider Assessment Fund."

Agency Response (Finance): "The fiscal yearend 2017 balance was transferred to the new fund in FY 18."

38. Flexibility for Spending From the Medicaid Restricted Account (H.B. 3, Items 87, 88, and 89, and S.B. 2, Item 80):

The Legislature intends that the Department of Health may use up to a combined maximum of \$9,000,000 from the General Fund Restricted - Medicaid Restricted Account and associated federal matching funds provided across the entire agency. The funding is limited to unanticipated costs for state match.

The Department of Health may use up to a combined maximum of \$9,000,000 from the General Fund Restricted - Medicaid Restricted Account and associated federal matching funds provided for Medicaid Mandatory Services and Medicaid Optional Services only in the case that non-federal fund appropriations provided for FY 2017 in all other items of appropriation for Medicaid are insufficient to pay appropriate Medicaid claims for FY 2017 when combined with federal matching funds.

The Department of Health may use up to a combined maximum of \$9,000,000 from the General Fund Restricted - Medicaid Restricted Account and associated federal matching funds provided for Medicaid Mandatory Services and Medicaid Optional Services only in the case that non-federal fund appropriations provided for FY 2017 in all other items of appropriation for Medicaid are insufficient to pay appropriate Medicaid claims for FY 2017 when combined with federal matching funds.

Agency Response: "The Department of Health used \$3,410,900 in the Medicaid Mandatory Services (LHAA) line item and \$2,753, 500 in the Medicaid Optional Services (LJAA) line item to cover costs of Medicaid Services in SFY 2017."

39. Eligibility Ceiling for Health Coverage Improvement Program (S.B. 2, Item 84):

The Legislature intends that the income eligibility ceiling for FY 2018 shall be the following percent of federal poverty level for UCA 26-18-411 Health Coverage Improvement Program: i.

0% for individuals who meet the additional criteria in 26-18-411 Subsection (3) ii. 55% for an individual with a dependent child.

Agency Response: "Medicaid worked with DWS to establish the income ceilings as designated by the legislature."

40. Authorization to Raise Fees Connected to Increased Medicaid Reimbursement Rates (S.B. 8, Lines 3959 to 3963):

Clinic Fees Tied to Medicaid Reimbursement Levels - The Department of Health benchmarks many of its charges in its medical and dental clinics to Medicaid reimbursement rates. If the Legislature authorizes reimbursement increases during the General Session, then the Legislature authorizes a proportional increase in effected clinic fees.

Agency Response: "Family Health and Preparedness reviewed the fee schedule and made recommendations to fee changes to align fees at or above the Medicaid reimbursement rates. It is the intent that if Medicaid rates increase, the clinics will charge the Medicaid rate at a minimum."

Reports Required via Intent Language from the 2017 General Session

41. Explore Using Medicaid Funding for School Nurses (S.B. 7, Item 38):

The Legislature intends that the Department of Health work with the Utah State Office of Education to explore using Medicaid funding for school nurses and report to the Office of the Legislative Fiscal Analyst by August 31, 2017. The report should answer at least the following questions: (1) Can Medicaid dollars be used to fund school nurses?, (2) In what circumstances can Medicaid dollars be used to fund school nurses?, and (3) How much Medicaid funding could be used for school nurses?

The report is available at

<https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/fiscal%20analyst/SchoolNurses8-17.pdf>.

42. Restriction of Initial Prescriptions for Short Acting Opiates (S.B. 7, Item 38):

The Legislature intends that the Department of Health report to the Office of the Legislative Fiscal Analyst by December 15, 2017 on the October 2016 policy change to restrict initial prescriptions for short acting opiates. The report should include at a minimum the results of the first 12 months and detail the financial impacts as well as the impacts to the supply of opiates.

The report is available at

https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/fiscal%20analyst/7_day_opiate.pdf.

43. Convert Provider Payments to Value-based (H.B. 3, Item 86):

The Legislature intends that the Medicaid accountable care organizations report to the Executive Appropriations Committee in May 2017 on their current efforts and future plans to convert their payments to direct-care providers to value-based payment arrangements. The Legislature also intends that the Department of Health work with the Medicaid accountable care organizations to prepare a proposal for modifying the Utah Medicaid accountable care organization structure effective January 1, 2019 to qualify as an "Other Payer Advanced Alternative Payment Model" under federal Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) standards.

The report is available at <https://le.utah.gov/interim/2017/pdf/00002453.pdf>.

44. Medicaid Coverage of Long Acting Reversible Contraceptives (S.B. 2, Item 79):

The Legislature intends that the Department of Health report to the Office of the Legislative Fiscal Analyst by September 1, 2017 on the policies of Medicaid and the accountable care organizations regarding the coverage of long acting reversible contraceptives to ensure that covered services are not being denied to women during inpatient stays in the hospital. Further, if necessary, the report shall identify the required next steps and a proposed timeline to make improvements to coverage of long acting reversible contraceptives.

The report is available at

https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/fiscal%20analyst/LARC_Report9-17.pdf.

45. Medicaid Opioid Prescribing Policies (S.B. 2, Item 79):

The Legislature intends that the Department of Health report to the Office of the Legislative Fiscal Analyst by October 1, 2017 on whether the policies of Medicaid and the accountable care organizations regarding opioid prescribing are in line with the 2016 Centers for Disease Control guidelines for prescribing opioids for chronic pain, and in line with the recommendations from the Utah opioid prescribing guidelines. Further, if necessary, the report shall identify the required next steps and a proposed timeline to make opioid prescribing policies more in line with referenced guidelines.

The report is available at

<https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/fiscal%20analyst/OpioidPrescribing.pdf>.

46. Medicaid Client Access to Dental Care (S.B. 2, Item 84):

The Legislature intends that the Department of Health report to the Office of the Legislative Fiscal Analyst by October 1, 2017 on access to care for Medicaid clients served under dental managed care contracts. At a minimum the report shall address: (1) how utilization of services under managed care arrangements has compared to utilization under fee for service arrangements in the same counties prior to implementation of managed care, (2) What current contractual obligations exist regarding access to care for Medicaid clients, (3) what changes could be made to improve client access to care under dental managed care and (4) recommendations for any statutory changes that would improve Medicaid member access to dental care.

The report is available at

<https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/fiscal%20analyst/DentalAccess.pdf>.

47. Increasing Salaries of Direct Care Workers (S.B. 2, Item 84):

The Legislature intends that the Department of Health shall: 1) Direct funds to increase the salaries of direct care workers; 2) Increase only those rates which include a direct care service component; 3) Monitor providers to ensure that all funds appropriated are applied to direct care worker wages and that none of the funding goes to administrative functions or provider profits; In conjunction with Intermediate Care Facilities - Intellectually Disabled providers, report to the Office of the Legislative Fiscal Analyst no later than September 1, 2019 regarding the implementation and status of increasing salaries for direct care workers.

The due date for this report is still in the future.

48. Quarterly Status Reports on Replacement of Medicaid Management Information System (S.B. 2, Item 84):

The Legislature intends that the Department of Health report quarterly to the Office of the Legislative Fiscal Analyst on the status of replacing the Medicaid Management Information System replacement beginning September 30, 2017. The reports should include, where applicable, the responses to any requests for proposals. At least one report during Fiscal Year 2018 should include an updated estimate of net ongoing impacts to the State from the new system. The Department of Health should work with other agencies to identify any impacts outside its agency.

The most recent reports are available at <https://medicaid.utah.gov/Legislative-Reports>.

49. Performance Measures for New Funding (H.B. 3, Item 83 and S.B. 2, Item 75):

The Legislature intends that the Department of Health prepare proposed performance measures for all new funding of \$10,000 or more for building blocks and give this information to the Office of the Legislative Fiscal Analyst by June 1, 2017. At a minimum the proposed measures should include those presented to the Subcommittee during the requests for funding. If the same measures are not included, a detailed explanation as to why should be included. The Department of Health shall provide its first report on its performance measures to the Office of the Legislative Fiscal Analyst by October 31, 2017 with another report two months after the close of the fiscal year where the funding was provided.

Here are the links to the required reports:

(1) June 1, 2017 - <https://le.utah.gov/interim/2017/pdf/00002773.pdf>

(2) October 31, 2017 -

a. <https://le.utah.gov/interim/2018/pdf/00000168.pdf>

b. <https://le.utah.gov/interim/2018/pdf/00000170.pdf>

50. Performance Measures for Executive Director's Operations Line Item (S.B. 7, Item 31):

The Legislature intends that the Department of Health report on the following performance measures for the Executive Director's Operations line item, whose mission is to (1) "The Utah Center for Health Data and Informatics serves all Utahns by collecting, registering, securing, analyzing, and making available accurate vital records and health data; and conducting public health and community health assessments to promote better health and health care." and (2 and 3) "The mission of the Office of Vital Records and Statistics (OVRs) is to administer the statewide system of vital records and statistics by: documenting and certifying facts related to Utahs vital events including births, deaths, adoption and family formation; reporting Utahs vital event data to the National Vital Statistics System; and responding to requests for data from health programs, health care providers, businesses, researchers, educational institutions, and the public.": (1) percent of UDOH restricted applications /systems that have reviewed, planned for, or mitigated identified risks according to procedure (Goal 95%), (2) births occurring in a hospital are entered accurately by hospital staff into the electronic birth registration system within 10 calendar days (Target = 99%), and (3) percentage of all deaths registered using the electronic death registration system (Target = 75% or more) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

51. Performance Measures for Family Health and Preparedness Line Item (S.B. 7, Item 32):

The Legislature intends that the Department of Health report on the following performance measures for the Family Health and Preparedness line item, whose mission is to "The mission of the Division of Family Health and Preparedness is to assure care for many of Utah's most

vulnerable citizens. The division accomplishes this through programs designed to provide direct services, and to be prepared to serve all populations that may suffer the adverse health impacts of a disaster, be it man-made or natural." (1) the percent of children who demonstrated improvement in social-emotional skills, including social relationships (Goal = 70% or more), (2) annually perform on-site survey inspections of health care facilities (Goal = 75%), and (3) the percentage of ambulance providers receiving enough but not more than 8% of gross revenue or 14% return on assets (Goal = 72%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

52. Performance Measures for Disease Control and Prevention Line Item (S.B. 7, Item 33):

The Legislature intends that the Department of Health report on the following performance measures for the Disease Control and Prevention line item, whose mission is to (1) "Improve the overall health of Utah's vulnerable populations through improved health outcomes, increased access to services and expanded understanding of the impact of communicable diseases." and (2) "The Tobacco Prevention and Control Program leads the fight to improve the health of Utah residents by promoting tobacco-free lifestyles and environments." And (3) "The Utah Public Health Laboratory provides high-quality testing and consultation services to entities fulfilling a public health mandate to protect the citizens of Utah." (1) gonorrhea cases per 100,000 population (Target = 62.3 people or less), (2) percentage of adults who are current smokers (Target = 9% or less), and (3) percentage of toxicology cases completed within 20 day goal (Target = 100%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

53. Performance Measures for Vaccine Commodities Line Item (S.B. 7, Item 34):

The Legislature intends that the Department of Health report on the following performance measures for the Vaccine Commodities line item, whose mission is to "The mission of the Utah Department of Health Immunization Program is to improve the health of Utah's citizens through vaccinations to reduce illness, disability, and death from vaccine-preventable infections. We seek to promote a healthy lifestyle that emphasizes immunizations across the lifespan by partnering with the 13 local health departments throughout the state and other community partners. From providing educational materials for the general public and healthcare providers to assessing clinic immunization records to collecting immunization data through online reporting systems, the Utah Immunization Program recognizes the importance of immunizations as part of a well-balanced healthcare approach." (1) Ensure that Utah children, adolescents and adults can receive vaccine in accordance with state and federal guidelines (Target = done), (2) Validate that Vaccines for Children-enrolled providers comply with Vaccines for Children program requirements as defined by Centers for Disease Control Operations Guide. (Target = 100%), and (3) Continue to improve & sustain immunization coverage levels among children, adolescents and adults (Target = done) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

54. Performance Measures for Local Health Departments Line Item (S.B. 7, Item 35):

The Legislature intends that the Department of Health report on the following performance measures for the Local Health Departments line item, whose mission is to "To prevent sickness and death from infectious diseases and environmental hazards; to monitor diseases to reduce spread; and to monitor and respond to potential bioterrorism threats or events, communicable

disease outbreaks, epidemics and other unusual occurrences of illness." (1) number of local health departments that maintain a board of health that annually adopts a budget, appoints a local health officer, conducts an annual performance review for the local health officer, and reports to county commissioners on health issues (Target = 13 or 100%), (2) number of local health departments that provide communicable disease epidemiology and control services including disease reporting, response to outbreaks, and measures to control tuberculosis (Target = 13 or 100%), (3) number of local health departments that maintain a program of environmental sanitation which provides oversight of restaurants food safety, swimming pools, and the indoor clean air act (Target = 13 or 100%), (4) achieve and maintain an effective coverage rate for universally recommended vaccinations among young children up to 35 months of age (Target = 90%), (5) reduce the number of cases of pertussis among children under 1 year of age, and among adolescents aged 11 to 18 years (Target = 73 or less for infants and 322 cases or less for youth), and (6) local health departments will increase the number of health and safety related school buildings and premises inspections by 10% (from 80% to 90%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

55. Performance Measures for Rural Physicians Loan Repayment Assistance Line Item (S.B. 7, Item 36):

The Legislature intends that the Department of Health report on the following performance measures for the Rural Physicians Loan Repayment Assistance line item, whose mission is to "As the lead state primary care organization, our mission is to elevate the quality of health care through assistance and coordination of health care interests, resources and activities which promote and increase quality healthcare for rural and underserved populations." (1) health care professionals serving rural areas (Target = 9) and (2) rural physicians serving rural areas (Target = 9) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

56. Performance Measures for Workforce Financial Assistance Line Item (S.B. 7, Item 37):

The Legislature intends that the Department of Health report on the following performance measures for the Workforce Financial Assistance line item, whose mission is to "As the lead state primary care organization, our mission is to elevate the quality of health care through assistance and coordination of health care interests, resources and activities which promote and increase quality healthcare for rural and underserved populations." (1) the number of applications received for this program (Target = 4), (2) the number of awards given (Target = 4), and (3) the average time to process applications through time of award (Target = 15 work days) by October 15, 2017 to the Social Services Appropriations.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

57. Performance Measures for Medicaid and Health Financing Line Item (S.B. 7, Item 38):

The Legislature intends that the Department of Health report on the following performance measures for the Medicaid and Health Financing line item, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns." (1) average decision time on pharmacy prior authorizations (Target = 24 hours or less), (2) percent of clean claims adjudicated within 30 days of submission (Target = 98%), and (3) total count of Medicaid and CHIP clients educated on proper benefit use and plan selection (Target = 115,000 or more) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

58. Performance Measure for Medicaid Sanctions Line Item (S.B. 7, Item 39):

The Legislature intends that the Department of Health report on how expenditures from the Medicaid Sanctions line item, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns," met federal requirements which constrain its use by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

59. Performance Measures for Children's Health Insurance Program Line Item (S.B. 7, Item 40):

The Legislature intends that the Department of Health report on the following performance measures for the Children's Health Insurance Program line item, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns.": (1) percent of children less than 15 months old that received at least six or more well-child visits (Target = 70% or more), (2) percent of members (12 - 21 years of age) who had at least one comprehensive well-care visit (Target = 39% or more), and (3) percent of adolescents who received one meningococcal vaccine and one TDAP (tetanus, diphtheria, and pertussis) between the members 10th and 13th birthdays (Target = 73%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

60. Performance Measures for Medicaid Mandatory Services Line Item (S.B. 7, Item 41):

The Legislature intends that the Department of Health report on the following performance measures for the Medicaid Mandatory Services line item, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns.": (1) percent of adults age 45-64 with ambulatory or preventive care visits (Target = 88% or more), (2) percent of deliveries that had a post partum visit between 21 and 56 days after delivery (Target = 60% or more), and (3) percent of customers satisfied with their managed care plan (Target = 85% or more) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

61. Performance Measures for Medicaid Optional Services Line Item (S.B. 7, Item 42):

The Legislature intends that the Department of Health report on the following performance measures for the Medicaid Optional Services line item, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns.": (1) annual state general funds saved through preferred drug list (Target = \$14.0 million general fund or more), (2) count of new choices waiver clients coming out of nursing homes into community based care (Target = 390 or more), and (3) emergency dental program savings (Target = \$500,000 General Fund savings or more) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

62. Performance Measures for Hospital Provider Assessment Fund (S.B. 7, Item 61):

The Legislature intends that the Department of Health report on the following performance measures for the Hospital Provider Assessment Expendable Revenue Fund, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns.": (1) percentage of hospitals invoiced (Target = 100%), (2) percentage of hospitals who have paid by the due date (Target => 85%), and (3) percentage of hospitals who have paid within 30 days after the due date (Target => 97%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

63. Performance Measures for Medicaid Expansion Fund (S.B. 7, Item 62):

The Legislature intends that the Department of Health report on the following performance measures for the Medicaid Expansion Fund, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns.": (1) percentage of hospitals invoiced (Target = 100%), (2) percentage of hospitals who have paid by the due date (Target => 85%), and (3) percentage of hospitals who have paid within 30 days after the due date (Target => 97%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

64. Performance Measures for Ambulance Service Provider Assessment Fund (S.B. 7, Item 63):

The Legislature intends that the Department of Health report on the following performance measures for the Ambulance Service Provider Assessment Fund, whose mission is to "We provide access to quality, cost-effective health care for eligible Utahns.": (1) percentage of providers invoiced (Target = 100%), (2) percentage of providers who have paid by the due date (Target = 85%), and (3) percentage of providers who have paid within 30 days after the due date (Target = 97%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

65. Performance Measures for Traumatic Brain Injury Fund (S.B. 7, Item 64):

The Legislature intends that the Department of Health report on the following performance measures for the Traumatic Brain Injury Fund, whose mission is to "The Violence and Injury Prevention Program is a trusted and comprehensive resource for data related to violence and injury. Through education, this information helps promote partnerships and programs to prevent injuries and improve public health.": (1) number of individuals with traumatic brain injury that received resource facilitation services through the traumatic brain injury Fund contractors (Target = 300), (2) number of Traumatic Brain Injury Fund clients referred for a neuro-psych exam or MRI (Magnetic Resonance Imaging) that receive an exam (Target = 40), and (3) number of community and professional education presentations and trainings (Target = 50) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

66. Performance Measures for Traumatic Head and Spinal Cord Injury Rehabilitation Fund (S.B. 7, Item 65):

The Legislature intends that the Department of Health report on the following performance measures for the Traumatic Head and Spinal Cord Injury Rehabilitation Fund, whose mission is to "The Violence and Injury Prevention Program is a trusted and comprehensive resource for data related to violence and injury. Through education, this information helps promote partnerships and programs to prevent injuries and improve public health.": (1) number of clients that received an intake assessment (Target = 101), (2) number of physical, speech or occupational therapy services provided (Target = 1,200), and (3) percent of clients that returned to work and/or school (Target = 50%) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

67. Performance Measures for Organ Donation Contribution Fund (S.B. 7, Item 66):

The Legislature intends that the Department of Health report on the following performance measures for the Organ Donation Contribution Fund, whose mission is to "The mission of the Division of Family Health and Preparedness is to assure care for many of Utah's most

INTENT LANGUAGE AND NONLAPSING BALANCES FOLLOW-UP (HEALTH)

vulnerable citizens. The division accomplishes this through programs designed to provide direct services, and to be prepared to serve all populations that may suffer the adverse health impacts of a disaster, be it man-made or natural." (1) increase Division of Motor Vehicles/Drivers License Division donations from a base of \$90,000 (Target = 3%), (2) increase donor registrants from a base of 1.5 million (Target = 2%), and (3) increase donor awareness education by obtaining one new audience (Target = 1) by October 15, 2017 to the Social Services Appropriations Subcommittee.

The report is available at <https://le.utah.gov/interim/2018/pdf/00000113.pdf>.

Division & Program	Nonlapsing Authority	FY 2017	Restrictions	Reason
Executive Director's Operations				
Adoption Document Access	UCA 63J-1-602.5(16)	\$ 23,900	"adoption document access as provided in Sections 78B-6-141, 78B-6-144, and 78B-6-144.5"	Health: "Fee collections related to the Adoption Records program are sporadic and not enough to support the activities in general. In addition, there were many upfront costs to create the database and there will be ongoing costs to maintain it. Nonlapsing authority allows the program to operate on an uninterrupted basis and provide the access the public as was intended when the program was developed."
Family Health and Preparedness				
Primary Care Grants	UCA 63J-1-602.1(11)	\$746,800	"Award a grant to a public or nonprofit entity to provide primary health care to a medically underserved population."	Health: "Funds are obligated and dispersed in contractual agreements with 1-2 year contractual periods. Agreements are awarded to primary health care providers providing primary care, behavioral health, and dental services to underserved or uninsured populations."
Workforce Financial Assistance				
Workforce Loan Program	UCA 63J-1-602.1(15)	\$421,900	Statute provides for professional educational loan repayment and scholarship assistance to health care professionals who locate or continue to practice in medically underserved areas of Utah.	Funds are obligated but dispersed across state fiscal years. Contracts may range from 2 to 4 years in length for contractual service obligations for health care professionals providing primary health care services to Utah's medically underserved populations.
Rural Physicians Loan Repayment Assistance				
Rural Physician Loan Repayment Program	UCA 63J-1-602.1(16)	\$332,500	education loan repayment assistance contract with a physician	Health: "Funds are obligated [and] dispersed across state fiscal years. Contractual agreements range from 2 to 4 years in length and are awarded to health care professionals providing primary care services in rural areas."
Children's Health Insurance Program (CHIP)				
CHIP	UCA 63J-1-602.1(14)	\$660,300	Use of all nonlapsing funds limited to caseload and utilization increases	State statute requires the CHIP program to serve all clients who qualify for services.

Nonlapsing Balances

Under the Budgetary Procedures Act ([UCA 63J-1-602](#)), no revenue collection, appropriation from a fund or account, or appropriation to a program may be treated as nonlapsing unless:

1. It is expressly referenced in [UCA 63J-1-602](#)
2. It is designated in a condition of appropriation in the appropriations bill, or
3. Nonlapsing authority is granted under [UCA 63J-1-603](#).

[UCA 63J-1-602](#) also states that "each legislative appropriations subcommittee shall review the accounts and funds that have been granted nonlapsing authority under this section of Section [63J-1-603](#)."

The table on the previous page details the \$2,185,400 in nonlapsing balances at the end of FY 2017 for the Department of Health that came from UCA 63J-1-602.

The Office of the Legislative Fiscal Analyst gave a statewide report entitled, "FY 2017 Preliminary Lapsing and Nonlapsing Balances," to the Executive Appropriations Committee in October of 2017. The report is available at <https://le.utah.gov/interim/2017/pdf/00004386.pdf>.

Nonlapsing Authority Via Intent Language		
Purpose	Authorized Total	Actual Nonlapsing
Medicaid Management Information System Replacement	\$8,800,000	\$8,800,000
Children With Complex Medical Conditions (2015 General Session)	\$3,216,000	\$2,959,700
Childcare and Health Care - Fines	all	\$1,008,200
Medicaid Sanctions	all	\$982,900
Laboratory Equipment and Medical Examiner	\$525,000	\$525,000
Federally Mandated Projects (Medicaid)	\$475,000	\$415,700
Emergency Medical Services - Fines	all	\$415,300
Executive Director - Four Projects	\$400,000	\$400,000
Drug Prevention Programs	\$500,000	\$286,900
Emergency Medical Services - Fees	\$250,000	\$250,000
Newborn Screening	\$250,000	\$250,000
Health Facility Licensure	\$245,000	\$245,000
Facility Plan Review Activities	\$210,000	\$210,000
Laboratory Equipment (Epidemiology)	\$175,000	\$175,000
Bleeding Disorders Program	\$50,000	\$50,000
Local Health Emergency	\$25,000	\$25,000
Traumatic Brain Injury Funding	\$725,000	\$300
Total	\$ 15,846,000	\$ 16,999,000

Summary of Agency-initiated Requests			
Line Item	FY 2016 Appropriated General Fund	Nonlapsing General Fund	%
Medicaid and Health Financing	\$ 4,905,400	\$ 415,700	8%
Executive Director's Operations	\$ 6,339,000	\$ 400,000	6%
Disease Control and Prevention	\$ 13,961,600	\$ 725,000	5%
Medicaid Mandatory Services	\$ 319,078,200	\$ 8,800,000	3%
Family Health and Preparedness	\$ 19,959,600	\$ 295,000	1%
Total	\$ 364,243,800	\$ 10,635,700	2.9%

Overview of Intent Language From the 2016 General Session

The following 20 items of intent language were passed in the 2016 General Session. These items could not be fully reviewed until the close of FY 2017. Most of these items were partially reviewed in an Issue Brief from the 2016 General Session entitled "Intent Language and Nonlapsing Balances Follow-up (Health)" (<https://le.utah.gov/interim/2017/pdf/00000300.pdf>). These 20 statements can be grouped into the following three categories:

1. Providing nonlapsing authority of \$15.8 million in FY 2017 from FY 2016 funds (17 intent language statements). Three intent language statements provided unlimited nonlapsing authority. The table on the previous page details the \$17.0 million retained under nonlapsing authority provided. The Department of Health has \$14.6 million in nonlapsing funds from the intent language statements with specific maximums.
2. Providing specific direction (two intent language statements)
3. Requiring a report (one intent language statements)

Agency-initiated requests for nonlapsing authority for General Fund resulted in 2.9% of General Fund appropriated in FY 2016 being retained as nonlapsing funds for those divisions with initiatives for nonlapsing authority. The second table on the previous page has a summary of this information. Some of the nonlapsing requests listed on the previous page were to retain funds other than General Fund or were not initiated by the Department of Health.

Nonlapsing Authority Via Intent Language From the 2016 General Session

1. Nonlapsing Authority for Four Projects in the Executive Director's Office (S.B. 3, Item 81):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that appropriations provided for the Department of Health's Executive Director's Office in Item 10 of Chapter 10, Laws of Utah 2015 shall not lapse at the close of Fiscal Year 2016. The use of any non lapsing funds is limited to \$400,000 for: (1) federal indirect reimbursement of \$200,000 due to an over-collection of Department of Technology Services encryption costs during Fiscal Year 2016 and changes to the Division of State Finance's Statewide Indirect Cost Allocation Plan allocation. The federal reimbursement will be reflected in lower indirect rates for Fiscal Year 2017; (2) Rewrite of the Utah Medical Examiners Database and the Electronic Death Entry Network which do not support mobile device and broad Internet interfaces; (3) Replacement of personal computers, software development, and information technology equipment in Executive Directors Office; and (4) Temporary Information Technology Manager to support server consolidation efforts and implementation of the Change Management initiative. (The agency nonlapsed \$400,000).

Agency Response: "These funds were used for the purposes described above. EDEN (the Electronic Death Registration application) and UMED (the Medical Examiner's application), will go live in FY2018."

2. Nonlapsing Authority for Health Facility Licensure and Certification Activities (S.B. 3, Item 82):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$245,000 of Item 11 of Chapter 10, Laws of Utah 2015 for the Department of Health's Family Health and Preparedness line item not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to health facility licensure and certification activities. (The agency nonlapsed \$245,000).

Agency Response: "The bureau used these funds to hire time limited support, survey, and background check staff to keep up with increasing numbers of health facility survey and background checks required."

3. Nonlapsing Authority for Testing Supplies and Processes for Emergency Medical Services (S.B. 3, Item 82):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$250,000 of Item 11 of Chapter 10, Laws of Utah 2015 for the Department of Health's Emergency Medical Services shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is

limited to testing, certifications, background screenings, replacement testing equipment and testing supplies. (The agency nonlapsed \$250,000).

Agency Response: “The Bureau used these balances as prescribed in the Emergency Medical Services program to further the efforts of Emergency Medical Services. The funds were used for EMS certification, background screenings, and on-going training in a four-year certification cycle for all EMS certified personnel.”

4. Nonlapsing Authority for Criminal Fine and Forfeiture Money for Emergency Medical Services (S.B. 3, Item 82):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that criminal fines and forfeiture money collected for the Department of Health's Emergency Medical Services in Item 11 of Chapter 10, Laws of Utah 2015 shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to purposes outlined in Section 26-8a-207(2). (The agency nonlapsed \$415,300).

Agency Response: “The funds were used for staff support, administration of the grants funds, other administrative costs defined in the chapter, trauma system development, and allocations in per-capita and competitive grants for the provision of emergency medical services.”

5. Nonlapsing Authority for Civil Penalty Money from Childcare and Health Care Provider Violations (S.B. 3, Item 82):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that civil money penalties collected for the Department of Health's Child Care Licensing and Health Care Licensing in Item 11 of Chapter 10, Laws of Utah 2015 from childcare and health care provider violations shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to trainings for providers and staff, as well as upgrades to the Child Care Licensing database. (The agency nonlapsed \$12,100 for Child Care, \$996,100 for Health Care Licensing).

Agency Response: “Health care civil money penalty funds from nursing facilities are restricted by federal law for use with projects that directly affect patients of nursing facilities. No projects were formally proposed, for the use of civil money penalty funds, though the department has discussed one project relating to the Life With Dignity Order for nursing facility residents. Child Care Licensing used civil money penalty funds for training staff and enhancements to the Child Care Licensing database.”

6. Nonlapsing Authority for Bureau of Health Facility Licensure, Certification and Resident Assessment for Plan Reviews (S.B. 3, Item 82):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$210,000 of Item 11 of Chapter 10, Laws of Utah 2015 from fees collected for the purpose of plan reviews by the Department of Health's Bureau of Health Facility Licensure, Certification and Resident Assessment shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to plan review activities. (The agency nonlapsed \$210,000).

Agency Response: “The nonlapsing funds for Health Facility Licensing/Certification were used for evaluating health care facility new construction and remodel projects in order to ensure compliance with appropriate health and fire codes in accordance with [state] health facility construction rules. The funds were used for salaries for architects and inspection staff to complete construction inspections. The funds were also be used for equipment and software upgrades and training for architects and plan review staff.”

7. Nonlapsing Authority for People with Bleeding Disorders (S.B. 3, Item 82):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$50,000 of Item 11 of Chapter 10, Laws of Utah 2015, funds appropriated for the Department of Health's Assistance for People with Bleeding Disorders Program shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to services to eligible clients. (The agency nonlapsed \$50,000).

Agency Response: "Funds were incorporated in the distribution of funds for eligible bleeding disorder clients."

8. Nonlapsing Authority for Equipment and Services for the Bureau of Epidemiology (S.B. 3, Item 83):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$175,000 of Item 12 of Chapter 10, Laws of Utah 2015 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to maintenance or replacement of computer equipment, software, or other purchases or services that improve or expand the services provided by the Bureau of Epidemiology. (The agency nonlapsed \$175,000).

Agency Response: "\$175,000 was non-lapsed and was used to develop software improvements to increase capabilities to track and respond to disease outbreaks and other emergency situations."

9. Nonlapsing Authority for Local Health Emergency (S.B. 3, Item 83):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$25,000 of Item 12 of Chapter 10, Laws of Utah 2015 for the Utah Department of Health, Division of Disease Control and Prevention shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to local health department expenses in responding to a local health emergency. (The agency nonlapsed \$25,000).

Agency Response: "Funding was provided to Local Health Departments to offset additional expenses resulting from public health emergency situations that developed; specifically the response actions to the measles/mumps outbreaks and the agal blooms emergency."

10. Nonlapsing Authority for Equipment for Newborn Screening (S.B. 3, Item 83):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$250,000 of Item 12 of Chapter 10, Laws of Utah 2015 fees collected for the Newborn Screening Program shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to maintenance, upgrading, replacement, or purchase of laboratory or computer equipment and software. (The agency nonlapsed \$250,000).

Agency Response: "The Newborn Screening Program used these funds to purchase new equipment and software to expand and update testing capabilities for Cystic Fibrosis. Also an update sample sequencing instruments and system was purchase to increase testing capacity and efficiency."

11. Nonlapsing Authority for Laboratory Equipment and Building Improvements (S.B. 3, Item 83):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$525,000 of Item 12 of Chapter 10, Laws of Utah 2015 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to laboratory equipment, computer equipment, software, and building improvements for the Utah Public Health Laboratory and the Office of the Medical Examiner. (The agency nonlapsed \$525,000).

Agency Response: "The Laboratory used the funds to upgrade outdated equipment for the chemistry program, to bring on equipment that will expand testing for the Medical Examiner's"

Office, and to replace outdated equipment for Enzyme Linked Immunosorbent Assay (ELISA) testing. The OME used the funds to replace outdated equipment and to continue programming for the Utah Medical Examiner Database (UMED)."

12. Nonlapsing Authority for Drug Prevention Programs (S.B. 3, Item 83):

Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$500,000 of Item 12 of Chapter 10, Laws of Utah 2015, for the Department of Health's Disease Control and Prevention line item for alcohol, tobacco, and other drug prevention reduction, cessation, and control programs shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to alcohol, tobacco, and other drug prevention, reduction, cessation, and control programs or for emergent disease control and prevention needs. (The agency nonlapsed \$286,900).

Agency Response: "The Utah Tobacco Prevention and Control Programs (TPCP) uses evidence-based and comprehensive strategies to reduce tobacco use and tobacco-related disease and death. Strategies include- preventing youth initiation of tobacco use, promoting quitting among adults and youth, eliminating exposure to secondhand smoke, and identifying and eliminating tobacco-related disparities and associated disease, disability and death. Non-lapsing funds were used to supplement TPCP's mass reach health communication interventions to increase the reach of targeted messages aimed at reducing tobacco use and increasing quit attempts and the use of cessation services."

13. Nonlapsing Authority for Computer Equipment and to Comply With Federally-mandated Projects in Health Care Financing (S.B. 3, Item 84):

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$475,000 provided for the Department of Health's Medicaid and Health Financing line item in Item 14 of Chapter 10, Laws of Utah 2015 shall not lapse at the close of Fiscal Year 2016. The use of nonlapsing funds is limited to compliance with federally mandated projects and the purchase of computer equipment and software. (The agency nonlapsed \$415,700).

Agency Response: "These funds were expended to replace computer equipment and software and to support the implementation costs of several federally mandated projects in FY 2017 including the 5010 – HIPAA compliance project, the HIT – Health Information Technology to convert provider medical records to an electronic health record, the TMSIS – Transformed Medicaid Statistical Information System federal reporting project, the 1095 – project to upgrade systems for the Affordable Care Act Information Returns (AIR) program, the SSNRI – Social Security Number Removal Initiative, and completion of ICD10 – project to update diagnosis codes."

14. Nonlapsing Authority for Medicaid Sanctions (S.B. 3, Item 85):

Under Section 63J-1-603 of the Utah Code, funds collected as a result of sanctions imposed under Section 1919 of Title XIX of the Federal Social Security Act and authorized in Section 26-18-3 of the Utah Code shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to the purposes outlined in Section 1919. (The agency nonlapsed \$982,900).

Agency Response: "Medicaid Sanctions can only be used for specific purposes as outlined under Section 1919 or Title XIX of the Federal Social Security Act and authorized in Section 26-18-3 of the Utah Code. The amount nonlapsed (or a portion thereof) will be used in Fiscal Year 2018 if such purposes arise and are approved during the year."

15. Nonlapsing Authority for Program to Serve Children With Complex Medical Conditions (H.B. 2, Item 60)

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$1,000,000 of the appropriations provided for the Medicaid Optional Services line item not lapse at the close of Fiscal Year 2017. The use of any nonlapsing funds is limited to a pilot program for assistance for children with disabilities and complex medical conditions to be used in similar amounts over two years with the goal of serving a similar number of clients over two years.

Agency Response: "These nonlapsing funds will be used to fund the pilot program for assistance for children with disabilities and complex medical conditions in FY 2018."

16. Nonlapsing Authority for Medicaid Management Information System Replacement (S.B. 3, Item 86):

Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$8,800,000 provided for the Department of Health's Medicaid Mandatory Services line item in Item 17 of Chapter 10, Laws of Utah 2015 shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to the redesign and replacement of the Medicaid Management Information System. (The agency nonlapsed \$8,800,000).

Agency Response: "These nonlapsing funds were used to address a portion of the PRISM [Provider Reimbursement Information System for Medicaid] system project costs in FY 2017."

17. Conditional Funding for Traumatic Brain Injury Fund (S.B. 3, Items 81, 83, and 84, and H.B. 2, Item 145):

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$100,000 funds not otherwise designated as nonlapsing to the Department of Health - Executive Director's Operations line item shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is for the Traumatic Brain Injury Fund. (The agency nonlapsed \$300).

The Legislature intends that the \$100,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$100,000 funds not otherwise designated as nonlapsing to the Department of Health - Executive Director's Operations line item being retained as nonlapsing in Fiscal Year 2016.

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$75,000 funds not otherwise designated as nonlapsing to the Department of Health - Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is for the Traumatic Brain Injury Fund. (The agency nonlapsed \$0).

The Legislature intends that the \$75,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$75,000 funds not otherwise designated as nonlapsing to the Department of Health - Disease Control and Prevention line item being retained as nonlapsing in Fiscal Year 2016.

Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$550,000 funds not otherwise designated as nonlapsing to the Department of Health - Medicaid and Health Financing line item shall not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is for the Traumatic Brain Injury Fund. (The agency nonlapsed \$0).

The Legislature intends that the \$550,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$550,000 funds not otherwise designated as nonlapsing to the Department of Health - Medicaid and Health Financing line item being retained as nonlapsing in Fiscal Year 2016.

Agency Response: "All funds retained were used in accordance with the purpose of the Traumatic Brain Injury Fund to provide professional intake assessments, and physical, speech, or

occupational therapy services to people with traumatic brain injuries. The goal is to facilitate them returning to school or work or improving their personal functionality.”

Specific Direction Provided via Intent Language from the 2016 General Session

18. Direction for New Funding for Medically Complex Children's Waiver (H.B. 2, Item 60):

The Legislature intends that all one-time appropriations provided in fiscal year 2017 for the building block entitled "Increase Caseload for Medically Complex Children's Waiver" be used to the maximal extent that is possible for opening new slots for children who meet criteria for this waiver.

Agency Response: “Funding was used to increase the number of participants in the program by 154.”

19. Two Percent and Other Increases for Medicaid Accountable Care Organizations (H.B. 2, Item 59):

The Legislature intends that the Medicaid Accountable Care Organizations receive a scheduled two percent increase effective January 1, 2017 consistent with the intent of S.B. 180, 2011 General Session. Additionally, the Legislature intends that the Medicaid Accountable Care Organizations receive funding to cover the cost of caseload growth, FMAP changes, and new high cost pharmaceuticals for rates set effective July 1, 2016.

Agency Response: “Effective January 1, 2017 ACO rate adjustments included a 2% increase. Effective July 1, 2016 funding to cover the cost of caseload growth, FMAP changes, and high cost pharmaceuticals was included in the rates.”

Reports Required via Intent Language from the 2016 General Session

20. Quarterly Status Reports on Replacement of Medicaid Management Information System (H.B. 2, Item 59):

The Legislature intends that the Department of Health report quarterly to the Office of the Legislative Fiscal Analyst on the status of replacing the Medicaid Management Information System replacement beginning September 30, 2016. The reports should include, where applicable, the responses to any requests for proposals. At least one report during Fiscal Year 2017 should include an updated estimate of net ongoing impacts to the State from the new system. The Department of Health should work with other agencies to identify any impacts outside its agency.

Here are the links to the required reports:

(1) March 31, 2017 -

[https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/mmis/HB2%20MMIS%20Quarterly%20Report 2017-03-31.pdf](https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/mmis/HB2%20MMIS%20Quarterly%20Report%202017-03-31.pdf)

(2) June 30, 2017 -

[https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/mmis/HB2%20MMIS%20Quarterly%20Report 2017-06-30.pdf](https://medicaid.utah.gov/Documents/pdfs/legislative%20reports/mmis/HB2%20MMIS%20Quarterly%20Report%202017-06-30.pdf)

Overview of Intent Language From the 2015 General Session

The following item of intent language was passed in the 2015 General Session. This item could not be fully reviewed until the close of FY 2016. Most of these items were partially reviewed in an Issue Brief from the 2016 General Session entitled “Intent Language and Nonlapsing Balances Follow-up (Health)” (<http://le.utah.gov/interim/2016/pdf/00000278.pdf>).

Specific Direction Provided via Intent Language from the 2015 General Session

1. Conditional TANF Funding for Nurse Family Partnership (S.B. 3, Item 113):

The \$1,000,000 in federal funds appropriated for the Nurse Family Partnership in the Department of Health in the Family Health and Preparedness line item is dependent upon the availability of and qualification for the Nurse Family Partnership for Temporary Assistance for Needy Families federal funds.

Agency Response: “During State Fiscal Year 2017 the Office of Home Visiting extended funding to 4 local Health Departments (Bear River, Davis, Weber/Morgan and Utah County) to [continue] home visiting services with TANF funding. As of June 30, 2017, 192 families have been enrolled in the Nurse-Family Partnership (NFP) home visiting model which provides life skill development to improve economic stability, child health by developing healthy relationships and support systems. All four Health Departments continue to focus enrollments in the Nurse-Family Partnership with TANF funding on high risk first time mothers from the third trimester until the child’s second birthday.”